Original

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	OMB APPROVAL	
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	Ring.
Filing Under (Check box(es) that apply): Likule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE DECEIVED
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	< APR 0 5 2005
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) THE EXTRASPATIAL INNOVATIONS	GROUP: MAN 185 P
Address of Executive Offices (Number and Street, City, State, Zip Code) 1917 West 4h Ave. Vanceur BC V65 1M7.	Telephone Number (Including Area Code) 60 44 · 30 7 · 1518
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code) as above.
Brief Description of Business	
In formatic Technology http://www.ExtraSp	
corporation limited partnership, already formed other (please specify):
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: The Conference of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77(16)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A-BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

					<u> </u>	SFORMATI	on abou	POFFERE	γς : .				
1.	Has the	issuer solo	1, or does th	ie issuer ir	ntend to se	II, to non-a	ccredited in	nvestors in	this offeri	ng'?	·····	Yes	No □
				Алѕ	wer also in	Appendix,	Column 2	, if filing ı	ınder ULO	E.	Not	rapp	oli cable
2.	What is	the minim	um investm	ent that w	ill be acce	pted from a	ny individ	ual?				<u>\$_</u> ⊋	<u>s_</u>
3.	Does the	e offering	permit joint	ownershi	p of a sing	le unit?						Yes	No 🗂
			ion request									15.23	السا
	If a pers or states	on to be lis , list the na	ilar remune sted is an ass ame of the b , you may so	ociated pe roker or de	erson or age ealer. If mo	nt of a brok are than five	er or deale (5) persor	r registered is to be list	l with the S ed are asso	EC and/or	with a state		
Full	Name (I	Last name	tīrst, it indi	vidual)	./	1							
Busi	ness or	Residence	Address (N	umber and	d Street, C	ty. State. Z							
Nam	e of Ass	ociated Bi	oker or Dea	aler		4. 10							
			Listed Has				Purchasers						
	(Check	"All States	s" or check	individual	States)	N (#	<i>}</i>	······				☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[D]
	TL D	IN	IA	KS	ΚÝ	LA	ME]	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	[NH]	[N]	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
													
Full	Name (1	Last name	first, if indi	vidual)									
Busi	ness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)				/		
Nam	e of Ass	ociated B	roker or De	aler						/			
												_ ,, ,, _, , ,	
			Listed Has										
	(Uneck	"All State:	s" or check	individua	States)				.,/			∐ AH	States
	AL IL	[AK]	AZ IA	AR KS	CA KY	CO LA	CT ME	MD	DC MA	FL MI	GA MN	HI MS	MO)
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK.	OR	PA
	RI	SC	SD	TN	TX	UT	ØΤ	VA	WA	WV	WI	WY	PR
Full	Name (Last name	first, if indi	ividual)									
Rusi	nace or	Dacidance	Address (?	Viimber on	d Street C	State	7in Code)						
Dusi	11022 01	Residence	. Address (i	vuinoer an	ni succi, C	ny, state,	zip code)						
Nam	e of Ass	sociated B	roker or De	aler									
State	es in Wh	ich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	indiyidua	l States)				••••	***************************************		☐ A1	l States
	AL	[AK]	AZ /	AR	CA	CO	CT	(DE)	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

COFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	this box and indicate in the columns below the amounts of the securities offered for exchang already exchanged. Type of Security	e and Aggregate Offering Price	Amount Already Sold
	Debt		s 1500
	Equity	7	
	Common Preferred	s <u> 250</u> 2	-3_1,00
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify)		
	Total		\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities is offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, income the number of persons who have purchased securities and the aggregate dollar amount of purchases on the total lines. Enter "0" if answer is "none" or "zero."	licate	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		s 1275
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	0 19	\$ 0/04 /
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all secu sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior first sale of securities in this offering. Classify securities by type listed in Part C — Questio	to the	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		s_12+3
	Total		s 100 +5
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the in The information may be given as subject to future contingencies. If the amount of an expendit not known, furnish an estimate and check the box to the left of the estimate.	surer.	
	Transfer Agent's Fees] \$
	Printing and Engraving Costs] \$
	Legal Fees] \$
	Accounting Fees] \$
			7 \$
	Engineering Fees		J
	Engineering Fees	_] S
] \$] \$

	COFFERING PRICE NUMBER OF INVESTORS EXPENSES AND USE OF P	ROCLEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		s <u> 12</u> 75.
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		_
	Purchase of real estate]\$	
	Purchase, rental or leasing and installation of machinery and equipment	¬ ¢	□\$
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	_	
	Repayment of indebtedness		
	Working capital		
	Other (specify):		
	Column Totals	\$_0.00	Os 12075
	Total Payments Listed (column totals added)	_ s <u> </u>	DD-75
	D. FEDERAL SIGNATURE		
sigi	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of I	sion, upon writt	
	171 1/	Date 00	1 DAST
	XTRASPATIAZ INNOVATIONS GREAT THE	24 h	may co
Naı	ne of Signer (Print or Type) Title of Signer (Print or Type)	4.	Č
	Temar Dead Ann Poss		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

790A ST		E-STATE SIGNATURE			and the second					
1.	Is any party described in 17 CFR 230.262 provisions of such rule?			Yes	No					
	Se	e Appendix, Column 5, for state r	esponse.							
2.	The undersigned issuer hereby undertakes to D (17 CFR 239.500) at such times as requi	-	of any state in which this notice is	filed a no	tice on Form					
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	The undersigned issuer represents that the limited Offering Exemption (ULOE) of the of this exemption has the burden of establi	state in which this notice is filed a	nd understands that the issuer cla							
	ner has read this notification and knows the conthorized person.	ntents to be true and has duly caused	this notice to be signed on its bel	alf by the	undersigned					
Issuer (Print or Type)	Signature	Date							
Name (1	Print or Type)	Title (Print or Type)								
	NO	US SUBSORT 1	S(N)							

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

NO US SUBSCAYAUS

				AP	PENDIX					
	Intend to non-a investor	to sell ccredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL						·				
AK							_			
AZ										
AR										
CA										
СО										
СТ										
DE										
DC										
FL										
GA										
HI										
ID										
IL										
IN										
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KS									L	
KY										
LA										
ME										
MD										
MA										
MI										
MN								.,		
MS										

NO US SUBSCRIBUS

				APR	ENDIX:					
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
MT										
NE										
NV										
NH										
NJ										
NM										
NY										
NC										
ND										
ОН										
OK										
OR										
PA										
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA										
WA										
WV										
WI										

NO US SURSCARUS.

	APPENDIX											
1		2	3		4							
		,										
	Intand	to sell	Type of security and aggregate						under State ULOE			
		ccredited	offering price		Type of	investor and		(if yes, attach explanation of				
}	investor	s in State	offered in state	amount purchased in State				waiver granted)				
	(Part B	-Item 1)	(Part C-Item 1)		(Part	C-Item 2)		(Part E-Item 1)				
				Number of Accredited		Number of Non-Accredited						
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No			
WY												
PR												